CITY OF ALCOA APPLICATION FOR MINIMUM BUSINESS TAX LICENSE

	TO BE D	ETERMINED BY 1	THE CITY OF ALCOA	
DATE FILED:	CLASSIFICATION:		LICENSE #:	
ADDRESS WHERE WORK IS BEING D (IF OTHER THAN LISTED ADDRESS, S		R CONTRACTOR,	ETC.)	
FIRM NAME:				
ADDRESS:				
BUSINESS PHONE:				
MAIL TO:				
TYPE BUSINESS:				
OWNER:				
ADDRESS:				
HOME PHONE:				
CALECTAVII				
RETAIL-WHOLESALE-BOTH:				
DATE OPENED:	SS#:		FED ID#:	
zoning district in which they are located. the approved uses of a particular zone in application process requires that you che intended on this application is allowed in applies to businesses termed as "custom! I have read and understand this stateme concurrently with the application of this li occupancy. Please check here only after reading the application of the statement of	n which that business is a ceck with a representative the zone indicated by the nary home occupations". Int and that it requires makense. City of Alcoa business.	or intends to locate of the zoning office business addres to investigate the	is subject to revocation to determine if the best. This acknowledgen zoning of my business.	n. This usiness nent also s location
Thouse officer flore strip after reading	ig the above statement.			
MINIMUM TAX PAYMENT PENALTY INTEREST RECORDING FEE		\$15.00 \$5.00		
TOTAL ENCLOSED	<u>\$</u>			
Signature	Title		Date	
MAIL TO:				

CITY OF ALCOA 223 ASSOCIATES BLVD. ALCOA, TN 37701